### ::-K-C-R-E-Y (When filled in)

Voucher No. 8363 23 February 1961

MEMORICHI FOR: Chief, Finance Division

ATTENTION

Monstary Brunch

LATELIECT

Misburgement of Treceury Check

1. It is kindly requested that a U. S. Treasury Check be drawn in favor of the company listed bereunder in the encunt stated, which will be applicable to the contract or agreement shown. The contract number and invoice identification must appear on the check.

Check drum in favor of: Edgerton, Germeshausen and Grier, Inc.

b. Amount:

\$82,986.55

e. Contract Muder:

TE-2191

d. Invoice Meder:

95, 96, and 97

e. Check to be dated:

28 February 1961

2. Pertinent documentation in connection with this classified transaction is on file in the office of the Comptroller, DFD-DD/P

3. The check should be deted as stated in Paragraph 1 app in the attached self-addressed envelope. If no envelope is affached, the underrigaed should be contacted on extension 8737/8788/ when payment, is resty for disposition.

The payment request is based on progress made by the contractor to date and should be processed against General Legiger Account No. 138, titled Disburgements of Appropriated Funds Chardhoble to Confidential
Funds Allotsents - Aveiting DCI Cortification | Bee Comptrollers Instruction
No. 32 and Comptrollers Notice No. 20-56 proved by the DCI on 15 December 1960. The General Ledger Account, Allowedt Symbol, and Object Class explicable to this request is as follows:

COST LEDGER AUSCONT THE

ATTOMARYP ACCORDE

OHL. OBJECT. CLACE

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DERIF

601.0 601.0 0528-0960-5300 1128-1966-5300 740 2191 740 2191

\$29,246.08

53,740.47

Cash

\$82,986.55

SIGNED

25X1 Anumorise Corchiying Officer

23 February 1961

Dist: 2 - Add 1 - Contract TE-2191 (Posting) G-E-G-R-E-T 1 - Voucher (Warm filled in) 1 - Voucher

EL:Ht/23 February 1961

Approved For Release 2008/12/11: CIA-RDP65-00523R000100160015-9 Standard Form No. 1034 7 GAO 5030 1038-106 ICES OTHER THAN PERSONAL Use continuation sheet(s) if necessary BU. VOU. NO. Page 1 of 1 U. S. PAID BY (Department, bureau, or establishment) Voucher prepared at \_\_\_\_\_ (Give place and date) Payee's Account No. \_\_\_\_\_ Discount Terms \_ Edgerton, Germeshausen & Grier, Inc. Las Vegas, Nevada (Address) TE 2191 Contract No. Date Req. No. Date Invoice Rec'd. Shipped from to Weight Govt. B/L No. ARTICLES OR SERVICES No. and Date of Date of Delivery (Enter description, item number of contract or Federal supply Quantity UNIT PRICE AMOUNT or Service schedule, and other information deemed necessary) Per Inv. Nos. \$56,202.*2*7 5,620.22 97 21,164.06 TOTAL \$82.986.55 (PAYEE MUST NOT USE THIS SPACE) PAYMENT: DIFFERENCES \_\_\_\_ COMPLETE PARTIAL

ADVANCE .		Amount verified; correct for (Signature or initials)	7 82 986.53
† Approved for =\$			STAT
ByTitle			3 Rel 61
Exchange rate = \$1.00	į.		(Date)
THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES AR	RE MAD		cting Officer)
ACCOUNTING CLASSIFICATION (Appropriation	Symbol must b	e shown; other classification option	nal) CTAT

on Treasurer of the United States Check No. \_\_ Paid by (Name of Bank) \_ , on \_ Payee \* When used in foreign countries, insert name of currency of country in which used.

FINAL

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$\_\_\_ over his official title.

over his official title.

### Standard Form No. 1034 Approved For Release 2008/12/11 : CIA-RDP65-00523R000100160015-9 PUBLIFO VOUCHER FOR PURCHASES AND D. O. YOU. NO. \_\_\_\_\_ SERVICES OTHER THAN PERSONAL

D.	Ο.	VOU.	NO

05

	' Use co	ntinuation sheet(s) if	necessary		BU. VC	DU. NO		
Contracting	s Officer						PAID BY	
9 9	(Department, bureau,	or establishment)						
epared at		9 F	ebruary	1961		-		
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count No	Dis	count Terms _				1 300 -0867-61		
learton. G	emmeshausen & Grier,	Tine.				%	t.	
(Payee)	ooniusaoni w di ice.	ALLY V				CO	PY / OF Z	
(Address)								
TI-2191 1	Date 4/26/57	C + 0/1 >				Invoíce Rec'd. No.		
		OR SERVICES			UNIT	PRICE	AMOUNT	
of Date of Deliv	e schedule, and other info	er of contract or Formation deemed no	deral supply cessary)	Quantity	Cost	Per		
	Month of December	1050						
	MOITOR OF December	1900						
	Direct Labor						\$14,466.95	
	Materials & Servi	.ces 0					25,075.65	
	Travel		10				1,499.50	
	Burden	4					10,519.62	
	G & A	w w	$\mathcal{F}$ $\mathcal{A}$				4.540.55	
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	112:00 7	EMUST NOTUS			TOTAL		\$56,202.27	
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			(S	ignature d	or initials)	26_		
		Р	ursuant to au	thority ves	sted in m	e, I certify	that	
for	=\$ <u>\( \mathcal{V} \)</u>	tt	is voucher is	correct a	nd proper	r for paym	ent.	
				ed Certifying (				
	41.20		(Authorize	ed Certifying (	Officer)		(Date)	
te		_						
	EVERSE OF THIS FORM MUST BE EXECUTED WHEN							
ACCOL	UNTING CLASSIFICATION (App	ropriation Symbol	must be sho	wn; other	classificat	tion option	nal)	
Charle No			on Treasure	r of the II	Inited Sta	ıtes		
Check No	N 10 10 10 10 10 10 10 10 10 10 10 10 10			U IIIE U	eu old			
Cneck No			_		()	lame of Bank	)	
Carl	00	1	9 Par	vee				
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Check N  Cash, \$  I in foreign country to certify and	ntries	, on, on	o	on on , 19 Pa	on	on	, on, 19Payee	

Stendard Form No. 10 Approved For Release 2008/12/11: CIA-RDP65-00523R000100160015-9

Partic Voucher for Purchases and Partic Vouche

### Servic<del>es Oth</del>er Than Personal

CONTINUATION SHEET

(Department, Dureau, of establishment)				1		eau Voucher No9
o. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal searchedule, and other information deemed necessary	QUAN TITY	Cost	Per	AMOUNT
		Direct Labor \$14,466.9  Materials & Services 25,075.6  Travel 1,499.5  *Burden 10,519.6  Total Direct Costs  G & A  Total Direct Costs @ 9%	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			\$51,561.72 4,640.55 \$56,202.2
. Decembe	er 1960 N	*Burden: on Premium Direct Labor \$13,149.5	3 @ 80;5-	\$10,519	62 (	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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# Stagdard Forth No. 1034 7 GAO 5030 1024-107 Approved For Release 2008/12/11: CIA-RDP65-00523R000100160015-9 PUBLIC VOUCHER FOR PURCHASES AND D. O. VOU. NO. \_\_\_\_\_ Use continuation sheet(s) if necessary BU. VOU. NO. \_\_\_\_

)	D.	Ο.	VOU.	NO.	
1					

96

U. S	ontracting	CITICON (Department, b)	ureau, or establishment)			-	PAID BY	
Voucher pre	pared at	, , ,	9 Februs	arv 1961				
						-	0 1 张1	
'ayee's Acc	ount No		Discount Terms				End #1	
[O3	dremton. (	Gerneshausen 2 Gr	rier, Inc.				C-0867-61	
	(Payee)		, , , , , , , , , , , , , , , , , , , ,			CC	OPY OF D	
	(Address)	. 1 . 1						
Contract No. The Shipped from	3-2191	Date 4/25/5 to	7 Req. No. Weight	Date	Govt. B/L	Invoíce Rec'd. . No.		
No. and Date o	f Date of Deliv	ARTIC	CLES OR SERVICES number of contract or Federal su	pply Quantity	UNIT	PRICE	AMOUNT	
Order	or Service	schedule, and other	information deemed necessary)		Cost	Per	•	
		Fixed Fee	December 1960				\$5,620.22	
					TOTAL		\$5,620.22	
PAYMENT:		(F	PAYEE MUST NOT USE THIS SE	PACE)				
COMPLETE	٦			DIFFERENCES	·			
PARTIAL	<u> </u>						E	
FINAL	<u> </u>						5,620.22	
PROGRESS	⊒			Amount ver	ified; corr	ect for		
ADVANCE				(Signature o	or initials)	20	-	
***	r	=\$	_ this vouch	o authority ve: er is correct a				
•				horized Certifying (	Officer)		(Date)	
		=\$1.J0		,/9	··· = = ·· /		(- <del></del> )	
	THE REVE	RSE OF THIS FORM MUST BE EXECUTED	WHEN PURCHASES ARE MADE OR SERVICES SEC	CURED WITHOUT WRI	TTEN AGREEMEI	NT IN ANY FO	RM	
	ACCOU	NTING CLASSIFICATION (A	Appropriation Symbol must be	shown; other	classificat	ion optio	nal)	
	Check No		on Trea	surer of the U	Inited Sta	tes		
Paid by						ame of Bank	k)	
	Cash, \$	. 01	n, 19	Payee				
* When used in		nsert name of currency of country i						
† If the ability to	o certify and author	rity to approve are combined in o	ne person, one signature only is nec- oved for \$					
essary; otherwise th over his official title		will sign on me time below. Appro	, and	Title				

Stendard Form No. 10 Approved For Release 2008/12/11 : CIA-RDP65-00523R000100160015-9

7 GAO 5030
1035-105
Public Voucher for Purchases and

Services Other Than Personal

### CONTINUATION SHEET

	Det -f	ARTICLES OR SERVICES		UNIT PRIC		PRICE AMOUNT	
o. and Date of Order	Date of Delivery or Service	(Enter description, item number of contract or Federal suppschedule, and other information deemed necessary)	QUAN- TITY	Cost	Per		
		Costs-December 1960 Fixed Fee (10% of above) Fixed Fee Previously Billed Amount this Voucher				\$56,202.27 5,620.22 -0- \$ 5,620.22	
	"I cer and that Contract	tify that the Fixed Fee claimed is it is proportionate to the progres	correct	and j on the	ust;		
		EDGERTON, GERMASHAUSEN & GRIER, II	īC.			STAT	
					***************************************		

### Standerd Form No. 103. Approved For Release 2008/12/11: CIA-RDP65-00523R000100160015-9 PUBLIF VOUCHER FOR PURCHASES AND D. O. VOU. NO. \_\_\_\_\_ ICES OTHER THAN PERSONAL

D. O. VOU. NO	_
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Date 4/26/57 to  ARTICL  Livery (Enter description, item nu	(Give place and date)  Discount Terms  Prier, Inc.  Req. No.  Weight  ES OR SERVICES  mber of contract or Federal s  nformation deemed necessary	Date (		PAID BY  PD - 0997-41  DFY i OF 2  ce Rec'd.
Date 4/26/57 to  ARTICL Center description, item nu schedule, and other in	13 Febru (Give place and date)  Discount Terms  Grier, Inc.  Req. No. Weight  ES OR SERVICES mber of contract or Federal suformation deemed necessary	Date (	Invoid Govt. B/L No.	ce Rec'd.
Date 1/26/57 to    Corneshausen & Co	(Give place and date)  Discount Terms  Prier, Inc.  Req. No.  Weight  ES OR SERVICES  mber of contract or Federal s  nformation deemed necessary	Date (	Invoid Govt. B/L No.	ce Rec'd.
Date 1/26/57 to    Corneshausen & Co	(Give place and date)  Discount Terms  Frier, Inc.  Req. No.  Weight  ES OR SERVICES  mber of contract or Federal selformation deemed necessary	Date (	Invoid Govt. B/L No.	ce Rec'd.
Date 4/26/57 to  ARTICL Schedule, and other in	Req. No. Weight ES OR SERVICES mber of contract or Federal s formation deemed necessary	Date (	Invoid Govt. B/L No.	ce Rec'd.
Date 4/26/57 to ARTICL livery (Enter description, item nu schedule, and other in	Req. No. Weight ES OR SERVICES mber of contract or Federal s iformation deemed necessary	upply Quantity	Invoid Govt. B/L No.	ce Rec'd.
Date 4/26/57 to ARTICL livery (Enter description, item nu schedule, and other in	Req. No. Weight ES OR SERVICES mber of contract or Federal s iformation deemed necessary	upply Quantity	Invoid Govt. B/L No.	ce Rec'd.
to  ARTICL  (Enter description, Item nu schedule, and other in  Labor Burden 3	Weight ES OR SERVICES Inber of contract or Federal s Information deemed necessary	upply Quantity	Invoid Govt. B/L No.	ce Rec'd.
to  ARTICL  (Enter description, Item nu schedule, and other in  Labor Burden 3	Weight ES OR SERVICES Inber of contract or Federal s Information deemed necessary	upply Quantity	Govt. B/L No. UNIT PRICE	·
to  ARTICL  (Enter description, Item nu schedule, and other in  Labor Burden 3	Weight ES OR SERVICES Inber of contract or Federal s Information deemed necessary	upply Quantity	Govt. B/L No. UNIT PRICE	·
to  ARTICL  (Enter description, Item nu schedule, and other in  Labor Burden 3	Weight ES OR SERVICES Inber of contract or Federal s Information deemed necessary	upply Quantity	Govt. B/L No. UNIT PRICE	·
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			TOTAL	\$21,164.06
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		DIFFERENCES		
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				21,164.06
		(Signature o	r initials) <i>El</i>	
	Pursuant	to authority ves	ted in me, I certif	y that
		•		•
	+			
	(Au	thorized Certifying C	Officer)	(Date)
EEVERSE OF THIS FORM MUST BE EXECUTED WI	IEN PURCHASES ARE MADE OR SERVICES S	ECURED WITHOUT WRIT	TEN AGREEMENT IN ANY FO	DRM
UNTING CLASSIFICATION (Ac	propriation Symbol must be	shown; other o	lassification optic	onal)
7. p				
	=\$=\$ 1.00  NEVERSE OF THIS FORM MUST BE EXECUTED WH	Pursuant this voucl  †	Amount veri (Signature o  Pursuant to authority ves this voucher is correct an  †  (Authorized Certifying C  =\$1.00	Pursuant to authority vested in me, I certif this voucher is correct and proper for pays

## Standor Form No. 10: Approved For Release 2008/12/11: CIA-RDP65-00523R000100160015-9 Polic Voucher for Purchases a Services Other Than Personal

CONTINUATION SHEET

No. and Date of Delivery		ARTICLES OR SERVICES		QUAN- TITY	UNIT PRICE		AMOUNT
of Urder	or Service	(Enter description, item number of schedule, and other informati	contract or Federal supply on deemed necessary)	TITY	Cost	Per	
		Labor Burden Adjus	tment				
eriod 960	Base	Rate Billed	Amount Billed	Adjus Rate		Adjusto Amount	1 2
uly-Dec.	\$ 60,676.	81 80;;	\$48,541.16	112%		<b>4</b> 67,958	.03\$19,416.57
960 uly-Dec.	188,727. 208,143.	G & A Adjustment  37 9,5  94  Total Adjustment J	16,985.46 uly-December 196	9%		18,732	-95 <u>1,747.49</u> \$21,164.06
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